

1952

ARIZONA STATE DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS

STATE FILE NO.

1054

CERTIFICATE OF DEATH

REGISTRAR'S NO.

175

BIRTH NO.

11 X PLACE OF DEATH AND RESIDENCE 5	1. PLACE OF DEATH A. COUNTY Pima		2. USUAL RESIDENCE A. STATE Arizona B. COUNTY Pima	
	B. CITY (IF OUTSIDE CORPORATE LIMITS, WRITE RURAL) Tucson		C. CITY (IF OUTSIDE CORPORATE LIMITS, WRITE RURAL) Tucson	
2 1 3 PRECEDENT PERSONAL DATA 171 4 249	3. NAME OF DECEASED (TYPE OR PRINT) Tressie May Evans Post		4. SEX Female	5. COLOR OR RACE White
	6. MARRIED <input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/>		7. DATE OF BIRTH MONTH 9 DAY 12 YEAR 1911	
426 0 CAUSE OF DEATH ITEM 18) 10	8. AGE YEARS 41 MONTHS 5 DAYS 2		9A. USUAL OCCUPATION (GIVE KIND OF WORK DURING MOST OF LIFE, EVEN IF RETIRED). None	
	9B. KIND OF BUSINESS OR INDUSTRY XXXXXX		10. BIRTHPLACE (STATE OR FOREIGN COUNTRY) Iowa	
OPERATIONS, AUTOPSY 2	11. CITIZEN OF WHAT COUNTRY USA		12. WAS DECEASED EVER IN U. S. ARMED FORCES? (YES, NO, OR UNKNOWN) (IF YES, WAR OR DATES OF SERVICE) no	
	13. SOCIAL SECURITY NO. none		14A. FATHER'S NAME Willis Sumeral Evans	
DEATH DUE TO EXTERNAL FORCE 1	14B. BIRTHPLACE (STATE OR COUNTRY) Iowa		15A. MOTHER'S MAIDEN NAME Elizabeth Ann Mayberry	
	15B. BIRTHPLACE (STATE OR COUNTRY) Ohio		16. INFORMANT'S SIGNATURE Post 3701 E # Lowell	
MEDICAL CORONER'S CERTIFICATION 1	17. DATE OF DEATH (MONTH) (DAY) (YEAR) Feb. 14, 1949		18. CAUSE OF DEATH ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C). *THIS DOES NOT MEAN THE MODE OF DYING, SUCH AS HEART FAILURE, ASTHMA, ETC. IT MEANS THE DISEASE INJURY, OR COMPLICATION WHICH CAUSED DEATH. PLACE DISEASE CONTRACTIONS.	
	19. DATE OF OPERATION Apr 28 1948		19B. MAJOR FINDINGS OF OPERATION Explantation - Carcinoma of Liver	
FUNERAL DIRECTOR AND REGISTRAR 55 2	20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		21A. ACCIDENT SUICIDE HOMICIDE (SPECIFY)	
	21B. PLACE OF INJURY (G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.)		21C. (CITY OR TOWN) (COUNTY) (STATE)	
25A. DATE REC'D BY LOCAL REG. 2-15-49	25B. REGISTRAR'S SIGNATURE Howard A. Bing		25C. DATE SIGNED Feb 15, 1949	
	25D. FUNERAL DIRECTOR'S SIGNATURE Howard A. Bing		25E. ADDRESS Tucson, Arizona	